SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER:						PAGE 127 OF				174
(check only one)										
	X	11a		11b		11c		12		
		13		14		15		16		17

Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) The Travelers Companies Inc. Political Action Committee (T-PAC) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Rizzo, Ellen, M,, Date of Receipt Mailing Address One Tower Square 2018 City Zip Code State Transaction ID: A2018-1331258 CT Hartford 06183 Amount of Each Receipt this Period FEC ID number of contributing C 138.46 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SVP ClaimShrdSvcs & CFO Claim Travelers Indemnity Co Receipt For: Aggregate Year-to-Date ▼ Primary General 1756.71 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Rohlfing, James, H, , Date of Receipt Mailing Address 5 Greentree Center 2018 525 Rte 73N Ste 407 City State Zip Code Transaction ID: A2018-1151506 NJ 08053 Marlton Amount of Each Receipt this Period FEC ID number of contributing 34.71 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Travelers Indemnity Co Associate Managing Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 410.75 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Rohlfing, James, H., Date of Receipt Mailing Address 5 Greentree Center 22 2018 525 Rte 73N Ste 407 City State Zip Code Transaction ID: A2018-1331261 NJ Marlton 08053 Amount of Each Receipt this Period FEC ID number of contributing C 34.71 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Travelers Indemnity Co Associate Managing Attorney Receipt For: Aggregate Year-to-Date ▼ Primary General 445.46 Other (specify) 207.88 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....